## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			1%				F	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NIMP	ER EXTRA		BASIC FEE	375.00		BASIC FEE	750.00
· · · · · · · · · · · · · · · · · · ·							F			ОН		730.00
TOTAL CHARGEABLE CLAIMS			minus 20= *			<del>,</del>	L	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 mir	nus 3 =				X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PE	RESENT					+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in colu						olumn 2	L.	TOTAL		OR	TOTAL	180
CLAIMS AS AMENDED - PART II									·		OTHER	THAN
		(Colur		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=	n .	OR	X84=	
L	FIRST PRESE	NTATION OF MI	ULTIPLE DEP	ENDEN	CLAIM			+140=		OR	+280=	
								TOTAL		OR	TOTAL	
	,	(Column 3)	А	DDIT. FEE		1	ADDIT. FEE					
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ij	X\$ 9=	• * 1	OR	X\$18=	
	Independent	*	Minus	***		=		X42=	,	0.0	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEP	TIPLE DEPENDENT CLAIM			<b>│</b> ├			OR		
							L	+140=		OR	+280=	
	. •						Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT FEE	
		(Column 1)	(Column 3)	•		ý	4					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST BER OUSLY FOR	PRESENT EXTRA		RATE >	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=			X84=	<u> </u>
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		<del> </del> -	/\		OR	7.07-	
+140=										OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL  ADDIT. FEE  ADDIT. FEE												
**:		mber Previously P ber Previously Pa							propriate bo			